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# <u>CERTIFICATE OF NEED (CON) REVIEW STANDARDS FOR</u> POSITRON EMISSION TOMOGRAPHY (PET) SCANNER SERVICES

(By authority conferred on the CON Commission by Section 22215 of Act No. 368 of the Public Acts of 1978, as amended, and sections 7 and 8 of Act No. 306 of the Public Acts of 1969, as amended, being sections 333.22215, 24.207 and 24.208 of the Michigan Compiled Laws.)

#### Section 1. Applicability

- Sec. 1. (1) These standards are requirements for the approval and delivery of services for all projects approved and Certificates of Need issued under Part 222 of the Code that involve PET scanner services.
- (2) PET is a covered clinical service for purposes of Part 222 of the Code. A PET scanner previously approved pursuant to Section 8-10 of these standards or AND recognized by the Department prior to the effective date of these standards as a dedicated research PET scanner and listed in Appendix BIN THE DEPARTMENT INVENTORY OF PET SCANNERS, AND now seeking approval to operate pursuant to sections 3, 4, or 5, shall be considered as a person requesting CON approval to initiate or expand, as applicable, a PET scanner service.
- (3) The Department shall use sections 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, and 17, 18, 19, 20, AND 21, as applicable, in applying Section 22225(1) of the Code, being Section 333.22225(1) of the Michigan Compiled Laws.
- (4) The Department shall use sections <u>11-14</u> and <u>12-15</u>, as applicable, in applying Section 22225(2)(c) of the Code, being Section 333.22225(2)(c) of the Michigan Compiled Laws.
- (5) THE DEPARTMENT SHALL USE SECTION 13, AS APPLICABLE, IN APPLYING SECTION 22215(1)(B) OF THE CODE, BEING SECTION 333.22215(1)(B) OF THE MICHIGAN COMPILED LAWS.

#### Section 2. Definitions

- Sec. 2. (1) For purposes of these standards:
- (a) "Accelerator" means an apparatus, such as a linear accelerator or cyclotron, for accelerating charged particles to high energies by means of electromagnetic fields.
- (B) "ACQUISITION OF AN EXISTING PET SCANNER" MEANS OBTAINING POSSESSION OR CONTROL OF AN EXISTING PET SCANNER FROM AN EXISTING PET SCANNER SERVICE BY CONTRACT, OWNERSHIP, LEASE, OR OTHER COMPARABLE ARRANGEMENT.
- (<u>bC</u>) "Acquisition of an existing PET scanner service" means obtaining possession or control of an existing PET service/<u>unit(s) AND ITS UNIT(S)</u> by contract, ownership, lease, or other comparable arrangement.
  - (eD) "Anatomical site" means the physical area that can be imaged by a single PET scan.
- $(d\underline{E})$  "Arterial sampling" means the insertion of an in-dwelling intra-arterial catheter for the withdrawal of arterial blood as part of a PET procedure.
- $(e\underline{F})$  "Bed position" means the anatomical site being imaged. A change in bed position occurs when a different anatomical site is imaged and the scan requires the physical relocation of the patient relative to the PET scanner.
- (fG) "Central service coordinator" means the legal entity that has, or will have, operational responsibility for a mobile PET scanner service.
- ( $\underline{gH}$ ) "Code" means Act No. 368 of the Public Acts of 1978, as amended, being Section 333.1101  $\underline{et}$   $\underline{seq}$ . of the Michigan Compiled Laws.
- (h) "Continuous data acquisition" means the continuous recording of scintigraphic events by a PET scanner for a specified period of time.

- (jK) "Dedicated research PET scanner" means a PET scanner approved pursuant to Section 8-10 of these standards ANDer a PET scanner recognized by the Department prior to the effective date of these standards as a dedicated research PET scanner and listed in Appendix B THE DEPARTMENT INVENTORY OF PET SCANNERS. The Department shall modify Appendix B THE DEPARTMENT INVENTORY OF PET SCANNERS AS APPLICABLE based on decisions made on Certificates of Need and CON applications.
- (kL) "Department" means the state agency known as the Michigan Department of Community Health (MDCH).
- (IM) "Department inventory of PET scanners" or "Department Inventory" means the list, maintained by the Department on a continuous basis, of: (i) the PET scanners operating pursuant to a valid CON issued under Part 222 or former Part 221; (ii) PET scanners that are not yet operational but have a valid CON issued under Part 222-or former Part 221; AND (iii) proposed PET scanners under appeal from a final Department decision made under former Part 221 or Part 222 or pending a hearing from a proposed decision issued under Part 222 of the Code; and (iv) proposed PET scanners that are part of a completed application under Part 222 of the Code (other than the application or applications in the comparative group under review). The list will not include PET scanners approved pursuant to Section 8 of these standards or PET scanners recognized by the Department as dedicated research PET scanners prior to the effective date of these standards.
- (mN) "Dynamic PET scan" means a PET scan that is closely timed to the administration of a radiopharmaceutical in order to capture the perfusion of the tracer.
- (n) "Existing PET scanner service" means the PET service at one geographic location listed on the Department Inventory of PET Scanners.
- (O) "EXISTING PET SCANNER" MEANS CON-APPROVED AND OPERATIONAL PET SCANNER USED TO PROVIDE PET SERVICES ON THE DATE AN APPLICATION IS SUBMITTED TO THE DEPARTMENT.
- (P) "EXISTING PET SCANNER SERVICE" MEANS CON-APPROVED AND OPERATIONAL SCANNER(S) USED TO PROVIDE PET SERVICES AT ONE SITE IN THE CASE OF A FIXED PET SERVICE OR AT EACH HOST SITE IN THE CASE OF A MOBILE PET SERVICE ON THE DATE AN APPLICATION IS SUBMITTED TO THE DEPARTMENT.
- (eQ) "Expand a fixed PET scanner service" means increasing the number of fixed PET scanners at the same geographic location of an existing fixed PET scanner service.
- (pR) "Expand a mobile PET scanner service" means the addition of a mobile PET scanner that will be operated by a central service coordinator in the same planning area in which the CSC is approved primarily to operate one or more mobile PET scanners as of the date an application is submitted to the Department.
  - (4S) "FDGs" means 2-{fluorine-18} fluoro-2-deoxy-D-glucose radiopharmaceuticals.
  - (FT) "Health service area" or "HSA" means the groups of counties listed in Section 1922.
  - (SU) "Hospital" means a health facility licensed under Part 215 of the Code.
- (\$\frac{\text{\sc V}}{\text{\sc V}}\) "Host site" means the geographic address at which a mobile PET scanner is authorized by CON to provide MOBILE PET scanner services.
- (<u>wW</u>) "Initiate a mobile PET host site" means the provision of PET services at a host site that has not received any approved mobile PET services within 12 months from the date an application is submitted to the Department. The term does not include the renewal of a lease for the mobile PET service(s).
- (VX) "Initiate a PET scanner service" means begin operation of a PET scanner service/scanner, either fixed or mobile, at a geographic location that does not offer (or has not offered within the last consecutive 12-month period) approved PET scanner services and is not listed on the Department Inventory of PET Scanners on the date on which an application is submitted to the Department.
  - (wY) "Institutional review board" or "IRB" means an institutional review board as defined by Public

(xZ) "Medicaid" means title XIX of the social security act, chapter 531, 49 Stat. 620, 42 U.S.C.1396r-6 and 1396r-8 to 1396v. TO 1396G AND 1396I TO 1396U.

(<u>yAA</u>) "Metropolitan statistical area county" means a county located in a metropolitan statistical area as that term is defined under the "standards for defining metropolitan and micropolitan statistical areas" by the statistical policy office of the office of information and regulatory affairs of the United States office of management and budget, 65 F.R. p. 82238 (December 27, 2000) and as shown in Appendix <u>CA</u>.

(zBB) "Michigan Inpatient Data Base" or "MIDB" means the data base compiled by the Michigan Health and Hospital Association or successor organization. The data base consists of inpatient discharge records from all Michigan hospitals and Michigan residents discharged from hospitals in border states for a specific calendar year.

(aaCC) "Micropolitan statistical area county" means a county located in a micropolitan statistical area as that term is defined under the "standards for defining metropolitan and micropolitan statistical areas" by the statistical policy office of the office of information and regulatory affairs of the United States office of management and budget, 65 F.R. p. 82238 (December 27, 2000) and as shown in Appendix CA. (bbDD) "Mobile PET scanner" means a PET scanner unit and transporting equipment, operated by a central service coordinator, that serves two or more host sites.

(ccEE) "Mobile PET scanner network" means the route (i.e., all host sites) <u>THAT</u> the central service coordinator is authorized to serve under CON. The mobile PET unit shall operate under a contractual agreement for the provision of PET services on a regularly scheduled basis at each host site, <u>WITH A MINIMUM OF ONE VISIT PER YEAR</u>.

(ddFF) "Out-state Michigan" means health service areas two (2) through eight (8).

 (eeGG) "Patient visit" means a single session lasting no more than one day utilizing a PET scanner during which 1 or more PET procedures are performed.

 (#HH) "Pediatric patient" means, for purposes of these standards, any patient less than 45-18 years of age.

(ggll) "PET data unit" means the result of the methodology as used in Section 1417.

(hh\_J\_J) "PET equivalent" means the number calculated in accordance with Section 13-16 for a single patient visit.

(iiKK) "PET procedure" means the acquisition of a single image or image sequence involving a single injection of tracer.

ection of tracer. (<mark>ijLL</mark>) "PET scan" means one (1) or more PET procedures performed during a single patient visit.

(kkMM) "PET scanner" means an FDA-approved full or partial ring scanner or coincidence system that has a crystal at least 5/8-inch thick, techniques to minimize or correct for scatter and/or randoms, and digital detectors and iterative reconstruction. Further, the term does include PET/CT scanner hybrids. If the PET/CT scanner will be used for computed tomography (CT) scans only in conjunction with the PET scan, then no separate CON is required for that CT use. The term does not include single-photon emission computed tomography systems (SPECT), x-ray CT systems, magnetic resonance, ultrasound computed tomographic systems, gamma cameras modified for either non-coincidence or coincidence imaging, or similar technology.

(HNN) "PET scanner services" or "PET services" means either the <u>CON-APPROVED</u> utilization of a PET unit(s) at one site in the case of a fixed PET service or in the case of a mobile <u>PET service</u>, the <u>utilization of a mobile PET unit</u> at each host site <u>IN THE CASE OF A MOBILE PET SERVICE</u>.

(mmOO) "Planning area" means the health service area(s), as applicable, and identified in Section 4923. (mPP) "Radionuclide generator" means the source of radioactive material, other than an accelerator or nuclear reactor, used to produce radiopharmaceuticals.

(eoQQ) "Radiopharmaceutical" means a radioactive pharmaceutical used for diagnostic or therapeutic purposes.

(RR) "RELOCATE A FIXED PET SCANNER" MEANS A CHANGE IN THE LOCATION OF A FIXED PET SCANNER(S) FROM THE EXISTING SITE TO A DIFFERENT SITE WITHIN THE RELOCATION ZONE.

(SS) "RELOCATE AN EXISTING FIXED PET SCANNER SERVICE" MEANS A CHANGE IN THE LOCATION OF A FIXED PET SCANNER SERVICE AND ITS UNIT(S) FROM THE EXISTING SITE TO A DIFFERENT SITE WITHIN THE RELOCATION ZONE.

(TT) "RELOCATION ZONE" MEANS A PROPOSED SITE THAT IS WITHIN A 10-MILE RADIUS OF

THE EXISTING FIXED PET SCANNER SERVICE FOR A METROPOLITAN STATISTICAL AREA COUNTY AND A 25-MILE RADIUS OF THE EXISTING FIXED PET SCANNER SERVICE FOR A MICROPOLITAN STATISTICAL AREA COUNTY, BASED UPON DOCUMENTATION ACCEPTABLE AND VERIFIED BY THE DEPARTMENT.

(ppUU) "Replace a PET scanner" means an equipment change, other than an upgrade, involving either a PET scanner, an accelerator if located on site, or other equipment related to the operation of the PET scanner service proposed by an applicant that results in that applicant operating the same number of PET scanners before and after project completion.

(qqVV) "Rural county" means a county not located in a metropolitan statistical area or micropolitan statistical areas as those terms are defined under the "standards for defining metropolitan and micropolitan statistical areas" by the statistical policy office of the office of information regulatory affairs of the United States office of management and budget, 65 F.R. p. 82238 (December 27, 2000) and as shown in Appendix CA.

(#WW) "SPECT" means single photon emission computed tomography.

(ssXX) "Static PET scan" means any PET scan that is not dynamic.

(#<u>YY</u>) "Tracer" means a radiopharmaceutical developed for use in PET scanner services which allows the quantification and/or qualitative images of chemistry, metabolism, and/or perfusion in vivo.

(<u>wuZZ</u>) "Transmission scan" means transmission computed tomography using a sealed radioactive photon source or x-ray tube photon source applied to the attenuation correction of the emission scan data.

(vv) "Upgrade a PET scanner" means an equipment change proposed by an applicant involving either or both the PET scanner and accelerator, if located at the same site, that involves a capital expenditure (whether purchase, lease, donation, or other arrangement) of \$500,000 or more during any period of time of no more than 24 consecutive months.

(AAA) "UPGRADE AN EXISTING PET SCANNER" MEANS ANY EQUIPMENT CHANGE THAT:

- (I) DOES NOT INVOLVE A CHANGE IN, OR REPLACEMENT OF, THE SCANNER;
- (II) DOES NOT RESULT IN AN INCREASE IN THE NUMBER OF PET SCANNERS;

(III) DOES NOT RESULT IN A CHANGE IN THE TYPE OF PET SCANNER (E.G., CHANGING A MOBILE PET SCANNER TO A FIXED PET SCANNER) OR A CHANGE IN MANUFACTURER; AND

(IV) INVOLVES A CAPITAL EXPENDITURE OF LESS THAN \$500,000 IN ANY CONSECUTIVE 24-MONTH PERIOD.

(2) The definitions in Part 222 shall apply to these standards.

## Section 3. Requirements for approval for all fixed SERVICES and mobile host sites

Sec. 3. (1) An applicant proposing to provide PET scanner services, shall provide, at the time an application is submitted to the Department, the following services AND MEDICAL SPECIALTIES:

- (a) nuclear medicine <u>SERVICES</u>, as documented on the certificate issued by the Department of Environmental Quality,
- (b) <u>SINGLE PHOTON EMISSION COMPUTED TOMOGRAPHY (SPECT) SERVICES, as documented on the Annual Hospital Statistical Questionnaire,</u>
  - (c) COMPUTED TOMOGRAPHY (CT) scanning SERVICES,
  - (d) magnetic resonance (MR) imaging (MRI) SERVICES, and
  - (e) cardiac catheterization SERVICES
- (F) OPEN HEART SURGERY,
  - (G) THORACIC SURGERY,
- \_\_\_\_(H) CARDIOLOGY,
- 214 (I) ONCOLOGY,

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- 215 (J) RADIATION ONCOLOGY,
- 216 (K) NEUROLOGY,
- 217 (L) NEUROSURGERY, AND
- 218 (M) PSYCHIATRY.

If the applicant does not provide any of the services listed in this subsection at the same geographic

location SITE at which the proposed PET scanner SERVICE will be located, the applicant shall include in the application, on the date it is submitted to the Department, written contracts or agreements with a hospital(s) located within 1) the HSA-SAME PLANNING AREA in which the proposed PET scanner-FOR THE SERVICES NOT PROVIDED AT THE PROPOSED PET SCANNER SERVICE SITE. is to be located when that location is within an HSA that includes any rural or micropolitan statistical area counties or 2) the HSA and a 20-mile radius of the proposed PET scanner location when that location is within an HSA other than an HSA that includes any rural or micropolitan statistical area counties, for the provision of these services. If the required documentation for this subsection is not submitted with the application on the designated application date, the application will be deemed filed on the first applicable designated application date after all required documentation is received by the Department.

- (2) An applicant shall demonstrate that it provides, at the time the application is submitted to the Department and as documented by submission of the current (updated within the last 12 months) curriculum vitae for each department director, the following medical specialty services:
  - (a) open heart surgery,
  - (b) thoracic surgery,
  - (c) cardiology,
    - (d) oncology,
- (e) radiation oncology,
  - (f) neurology,
  - (g) neurosurgery, and
  - (h) psychiatry.

If the applicant does not provide any of the medical specialty services listed in this subsection at the same geographic location at which the proposed PET scanner will be located, the applicant shall include in the application, on the date it is submitted to the Department, written contracts or agreements with a hospital(s) located within 1) the HSA in which the proposed PET scanner is to be located when that location is within an HSA that includes any rural or micropolitan statistical area counties or 2) the HSA and a 20-mile radius of the proposed PET scanner location when that location is within an HSA other than an HSA that includes any rural or micropolitan statistical area counties, for the provision of these medical specialty services. If the required documentation for this subsection is not submitted with the application on the designated application date, the application will be deemed filed on the first applicable designated application date after all required documentation is received by the Department.

(32) If a proposed PET scanner service does not involve an on-site source of radiopharmaceuticals, an applicant must provide in the application, on the date it is submitted to the Department, a written contract or agreement that demonstrates that a reliable supply of radiopharmaceuticals will be available to the proposed PET scanner service, for the proposed uses. If the required documentation for this subsection is not submitted with the application on the designated application date, the application will be deemed filed on the first applicable designated application date after all required documentation is received by the Department.

#### Section 4. Requirements for approval for applicants proposing to initiate a PET scanner service

Sec. 4. (1) An applicant proposing to initiate a fixed PET scanner service shall project an operating level of at least 2,600 PET data units for each proposed PET scanner based on the methodology used in Section 4417.

- \_\_\_\_(2)\_ An applicant proposing to initiate a mobile PET scanner service shall project 2,100 PET data units for each proposed MOBILE PET scanner based on the methodology used in Section 4417.
- (a) Of the 2,100 PET data units, the applicant(s) shall project a minimum of 360 PET data units, within the same planning area and a 20-mile radius of the proposed host site, for each proposed PET scanner service site located in a planning area that does not include any rural or micropolitan statistical area counties and a minimum of 240 PET data units, within the same planning area as the proposed host site, for each PET scanner service site located in a planning area that includes any rural or micropolitan statistical area counties.

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- PET scanner service operates predominantly outside of Michigan and that all of the following requirements are met: (i) The proposed host site will be located in HSA 8. (ii) The proposed host site in HSA 8 demonstrates a minimum of 240 PET data units based on the
- methodology in Section 4417.

(b) The requirements of subsection (2) shall not apply to an applicant that proposes to add a Michigan site as a host site if the applicant, the central service coordinator, demonstrates that the mobile

- (3) Initiation of a mobile PET host site does not include the provision of mobile PET services at a host site if the applicant, whether the host site or the central service coordinator, demonstrates or provides, as applicable, each of the following:
- (a) The host site has received mobile PET services from an existing approved mobile PET unit within the most recent 12-month period as of the date the application is submitted to the Department.
- (b) The addition of a host site to a mobile PET SCANNER SERVICEunit will not increase the number of PET units operated by the central service coordinator or by any other person.
- (c) THE APPLICATION IS SUBMITTED Notification to the Department of the addition of a host site prior to the provision of PET services ON THAT NETWORK by that mobile PET unit in accordance with
- (d) A signed certification, on a form provided by the Department, whereby each THE host site for each mobile PET unit has agreed and assured that it will provide PET services in accordance with the terms for approval set forth in Section 41-14 AND 15of these standards, as applicable. The APPLICANTcentral service coordinator also shall PROVIDE identify all current host sites and A CURRENT route schedules, on this form, that are served by the mobile route as of the date of the signed certification, or are committed in writing to be served, by the mobile route FOR THE MOBILE PET SCANNER SERVICE.
- (e) The central service coordinator requires, as a condition of any contract with each host site, compliance with the requirements of these standards by that host site, and the central service coordinator assures compliance, by that host site, as a condition of the CON issued to the central service coordinator.
- (F) AN APPLICANT, WHETHER A CENTRAL SERVICE COORDINATOR OR A PROPOSED HOST SITE, PROPOSING TO INITIATE A MOBILE PET HOST SITE TO AN EXISTING MOBILE PET NETWORK OR A MOBILE PET NETWORK THAT HAS BEEN APPLIED FOR UNDER SECTION 5(3), SHALL NOT BE REQUIRED TO DEMONSTRATE A MINIMUM NUMBER OF PET DATA UNITS. `
- (4) AN APPLICANT THAT MEETS ALL OF THE FOLLOWING REQUIREMENTS SHALL NOT BE REQUIRED TO BE IN COMPLIANCE WITH SUBSECTION (1):
  - (A) THE APPLICANT IS PROPOSING TO INITIATE A FIXED PET SCANNER SERVICE.
- (B) THE APPLICANT IS CURRENTLY A HOST SITE BEING SERVED BY ONE OR MORE MOBILE PET SCANNERS.
  - (C) THE APPLICANT HAS RECEIVED, IN AGGREGATE, THE FOLLOWING:
- (I) AT LEAST 4,500 PET EQUIVALENTS, FOR AN APPLICANT IN A METROPOLITAN STATISTICAL AREA, DURING THE MOST RECENT 12-MONTH PERIOD FOR WHICH THE DEPARTMENT HAS VERIFIABLE DATA.
- (I) AT LEAST 4,000 PET EQUIVALENTS, FOR AN APPLICANT IN A MICROPOLITAN OR RURAL STATISTICAL AREA, DURING THE MOST RECENT 12-MONTH PERIOD FOR WHICH THE DEPARTMENT HAS VERIFIABLE DATA.
- (D) THE APPLICANT SHALL INSTALL THE FIXED <mark>PET</mark> UNIT AT THE SAME SITE AS THE **EXISTING APPROVED HOST SITE.**
- (E) THE APPLICANT SHALL CEASE OPERATION AS A HOST SITE AND NOT BECOME A HOST SITE FOR AT LEAST 12 MONTHS FROM THE DATE THE FIXED PET SCANNER, INCLUDING ANY TEMPORARY SCANNER USED DURING THE TRANSITION FROM MOBILE TO FIXED, BECOMES OPERATIONAL.
- (4) One applicant proposing to initiate a fixed PET scanner in out-state Michigan shall be exempt from Section 4(1) for its first proposed clinical fixed PET scanner if that applicant meets all of the following conditions:
  - (a) The applicant operates a cyclotron capable of producing radioactive fluorine-18 and proposes

(b) All FDGs provided to other PET services in out-state Michigan, referenced in subdivision (a), shall be provided at the cost of production and distribution. The written agreements required by subdivision (a) shall include specific provisions for resolving any disagreements, between the parties, about the subsequent terms and conditions for assuring that the FDGs will be provided at the cost of production and distribution.

#### Section 5. Requirements for approval for applicants proposing to expand a PET scanner service

Sec. 5. (1) An applicant proposing to increase the number of <u>FIXED</u> PET scanners (second, third, etc.), whether fixed or mobile, unless otherwise specified, in addition to a <u>PET scanner previously approved for the same applicant</u>, shall demonstrate the following:

(A)FOR AN APPLICANT IN A METROPOLITAN STATISTICAL AREA, ALL OF THE APPLICANT'S APPROVED FIXED PET SCANNERS HAVE PERFORMED AN AVERAGE OF AT LEAST 5,500 PET EQUIVALENTS PER PET SCANNER DURING THE MOST RECENT 12-MONTH PERIOD FOR WHICH THE DEPARTMENT HAS VERIFIABLE DATA.

(B)FOR AN APPLICANT IN A MICROPOLITAN OR RURAL STATISTICAL AREA, ALL OF THE APPLICANT'S APPROVED FIXED PET SCANNERS HAVE PERFORMED AN AVERAGE OF AT LEAST 5,000 PET EQUIVALENTS PER PET SCANNER DURING THE MOST RECENT 12-MONTH PERIOD FOR WHICH THE DEPARTMENT HAS VERIFIABLE DATA.

- (a) All of the applicant's PET scanners, both fixed and mobile, at the same geographic location as the proposed additional PET unit, have performed an average of at least 6,000 PET equivalents per PET scanner during the most recent 12-month period for which the Department has verifiable data.
- (C) IN THE CASE OF A FIXED PET SCANNER SERVICE, THE ADDITIONAL PET SCANNER SHALL BE LOCATED AT THE SAME GEOGRAPHIC LOCATION AS THE EXISTING FIXED PET SCANNER SERVICE UNLESS THE APPLICANT MEETS THE APPLICABLE REQUIREMENTS FOR RELOCATION IN ACCORDANCE WITH SECTION 9.
- (2) AN APPLICANT PROPOSING TO INCREASE THE NUMBER OF MOBILE PET SCANNERS (SECOND, THIRD, ETC.) SHALL DEMONSTRATE THE FOLLOWING:
- (A) FOR AN APPLICANT SERVING AT LEAST ONE EXISTING HOST SITE IN A METROPOLITAN STATISTICAL AREA, ALL OF THE APPLICANT'S APPROVED MOBILE PET SCANNERS ON A MOBILE ROUTE HAVE PERFORMED AN AVERAGE OF AT LEAST 5,000 PET EQUIVALENTS PER PET SCANNER DURING THE MOST RECENT 12-MONTH PERIOD FOR WHICH THE DEPARTMENT HAS VERIFIABLE DATA.
- (B) FOR AN APPLICANT SERVING ONLY HOST SITES IN MICROPOLITAN OR RURAL STATISTICAL AREAS, ALL OF THE APPLICANT'S APPROVED MOBILE PET SCANNERS ON A MOBILE ROUTE HAVE PERFORMED AN AVERAGE OF AT LEAST 4,500 PET EQUIVALENTS PER PET SCANNER DURING THE MOST RECENT 12-MONTH PERIOD FOR WHICH THE DEPARTMENT HAS VERIFIABLE DATA.
- (3) AN APPLICANT THAT MEETS ALL OF THE FOLLOWING REQUIREMENTS SHALL NOT BE REQUIRED TO BE IN COMPLIANCE WITH SUBSECTION (1):
  - (A) THE APPLICANT IS PROPOSING TO INITIATE A MOBILE PET SCANNER SERVICE.
  - (B) THE APPLICANT IS CURRENTLY A FIXED PET SCANNER SERVICE.
  - (C) THE APPLICANT HAS DEMONSTRATED THE FOLLOWING:
- (I) FOR AN APPLICANT IN A METROPOLITAN STATISTICAL AREA, ALL OF THE APPLICANT'S APPROVED FIXED PET SCANNERS HAVE PERFORMED AN AVERAGE OF AT LEAST 5,500 PET EQUIVALENTS PER PET SCANNER DURING THE MOST RECENT 12-MONTH PERIOD FOR WHICH THE DEPARTMENT HAS VERIFIABLE DATA.
  - (II) FOR AN APPLICANT IN A MICROPOLITAN OR RURAL STATISTICAL AREA, ALL OF THE

APPLICANT'S APPROVED FIXED PET SCANNERS HAVE PERFORMED AN AVERAGE OF AT LEAST 5,000 PET EQUIVALENTS PER PET SCANNER DURING THE MOST RECENT 12-MONTH PERIOD FOR WHICH THE DEPARTMENT HAS VERIFIABLE DATA.

- (D) AT LEAST TWO (2) SEPARATE CON APPLICATIONS HAVE BEEN SUBMITTED SIMULTANEOUSLY AS HOST SITES FOR THE PROPOSED MOBILE PET SERVICE, SUBJECT TO SECTION 4(3).
- (E) A PROPOSED REGULAR ROUTE SCHEDULE, THE PROCEDURES FOR HANDLING EMERGENCY SITUATIONS, AND COPIES OF ALL PROPOSED CONTRACTS RELATED TO THE MOBILE PET SERVICE HAVE BEEN INCLUDED IN THE CON APPLICATION.
  - (F) THE REQUIREMENTS OF SECTION 3 HAVE BEEN MET.

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- (G) THE APPLICANT AGREES TO COMPLY WITH SECTIONS (13) AND (14).
- (H) THE MOBILE UNIT MUST OPERATE WITHIN THE SAME PLANNING AREA AND COMPLY WITH SECTION 4(2)(A).

(b)In the case of a fixed PET scanner service, the additional PET scanner shall be located at the same geographic location as the applicant's existing fixed PET scanner/service. If the scanner will not be located at the same geographic location, the applicant must meet the requirements to initiate or expand a PET scanner service at the proposed location/site, in accordance with Section 4 or Section 5, respectively.

## Section 6. Requirements for approval for applicants proposing to replace or upgrade a PET scanner

Sec. 6. (1) An applicant proposing to replace er upgrade an existing FIXED PET scanner(s), whether fixed or mobile, shall demonstrate the THAT volume of PET equivalents performed during the most recent 12-month period for which the Department has verifiable data, meets subdivision (a): ALL OF THE APPLICANT'S APPROVED AND OPERATING FIXED PET SCANNERS HAVE PERFORMED AN AVERAGE OF AT LEAST 4,500 PET EQUIVALENTS PER PET SCANNER DURING THE MOST RECENT 12-MONTH PERIOD FOR WHICH THE DEPARTMENT HAS VERIFIABLE DATA.

(a) All of the applicant's existing fixed PET scanners, operated at the same geographic location, have performed an average of 4,500 PET equivalents, or all of the applicant's existing mobile PET scanners have performed an average of 3,000 PET equivalents, as applicable.

(2) AN APPLICANT PROPOSING TO REPLACE AN EXISTING MOBILE PET SCANNER(S) SHALL DEMONSTRATE THAT ALL OF THE APPLICANT'S APPROVED AND OPERATING MOBILE PET SCANNERS ON A MOBILE ROUTE HAVE PERFORMED AN AVERAGE OF AT LEAST 3,000 PET EQUIVALENTS PER PET SCANNER DURING THE MOST RECENT 12-MONTH PERIOD FOR WHICH THE DEPARTMENT HAS VERIFIABLE DATA.

- (3) An exemption to subdivision (a) SUBSECTIONS (1) AND (2) may be made by the Department, if an applicant demonstrates to the satisfaction of the Department, the following:
- (iA) The existing PET scanner is technologically incapable of performing the applicable minimum number of PET equivalents. An applicant proposing a replacement under this subsection shall provide documentation, satisfactory to the Department, from a person or an organization with recognized professional expertise regarding that type of equipment, other than the applicant or a representative of a manufacturer or vendor of that type of equipment, indicating the number of PET equivalents the existing equipment is technologically capable of performing. The applicant also shall provide documentation, satisfactory to the Department, that the number of PET equivalents performed during the most recent 12-month period, for which the Department has verifiable data, was the number the equipment is technologically capable of performing.
- (24) An applicant proposing to replace a PET scanner(s), whether fixed or mobile, shall demonstrate:
- (a) the equipment to be replaced is fully depreciated according to generally accepted accounting principles or

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(b) either of the following:

- (i) the existing equipment clearly poses a threat to the safety of the public and the applicant's staff as determined by the Department or other qualified agency or individual (physicist, US Department of Energy, applicant's radiation safety committee, etc.) or
- (ii) the proposed replacement PET scanner(s) offers technological improvements that enhance quality of care, increase efficiency, and reduce operating costs and patient charges.
- (5) AN APPLICANT THAT MEETS ALL OF THE FOLLOWING REQUIREMENTS SHALL NOT BE REQUIRED TO BE IN COMPLIANCE WITH SUBSECTIONS (1), (2), (3) AND (4):
- (A) THE EXISTING PET SCANNER BECAME OPERATIONAL BEFORE JANUARY 1, 2005 AND IS NOT PET/CT SCANNER HYBRID.
  - (B) THE PROPOSED PET SCANNER IS A PET/CT SCANNER HYBRID.
- (36) In the case of a fixed PET scanner-service, the <u>PROPOSED</u> PET scanner will be located at the same <u>SITEgeographic location</u> as the applicant's existing fixed PET scanner/service to be replaced/upgraded. If the <u>PROPOSED</u> scanner will not be located at the same <u>SITEgeographic location</u>, the applicant must meet the requirements to <u>initiate or expandRELOCATE</u> a PET scanner service at the proposed site, in accordance with <u>Section 4 or Section 5</u>, respectively.<u>SECTION 9</u>.

# Section 7. Requirement<u>S</u> for approval -<u>FOR</u> applicants proposing to acquire an existing PET scanner <u>service</u>

- Sec. 7. An applicant proposing to acquire an existing PET scanner, service, whether fixed or mobile, shall demonstrate that it meets all of the following:
- (a) The project is limited solely to the acquisition of an existing PET scanner. <u>/service and does not involve a change in the geographic location of the scanner(s).</u>
- (b) The project will not change the number of PET scanners listed on the Department Inventory of PET Scanners\_-at the geographic location of the PET scanner service being acquired, unless the applicant demonstrates that the project is in compliance with the requirements of Section 3, 4, or 5, as applicable.
- (c) The project will not result in the replacement of the PET scanner (s) at the PET scanner service to be acquired unless the applicant demonstrates that the requirements of Section 6 also have been met.
- (d) All-THE PET scanners to be acquired are IS listed on the Department Inventory of PET Scanners on the date the application is submitted to the Department.
- (e) The applicant agrees to operate the PET scanner service in accordance with all applicable project delivery requirements set forth in Section 11-14 of these standards.

# SECTION 8. REQUIREMENTS FOR APPROVAL FOR APPLICANTS PROPOSING TO ACQUIRE AN EXISTING PET SCANNER SERVICE

- SEC. 8. AN APPLICANT PROPOSING TO ACQUIRE AN EXISTING PET SCANNER SERVICE, WHETHER FIXED OR MOBILE, SHALL DEMONSTRATE THAT IT MEETS ALL OF THE FOLLOWING:
- (A) THE PROJECT IS LIMITED SOLELY TO THE ACQUISITION OF AN EXISTING PET SCANNER SERVICE.
- (B) THE PROJECT WILL NOT CHANGE THE NUMBER OF PET SCANNERS LISTED ON THE DEPARTMENT INVENTORY OF PET SCANNERS.
- (C) THE PROJECT WILL NOT RESULT IN THE REPLACEMENT OF THE PET SCANNERS TO BE ACQUIRED UNLESS THE APPLICANT DEMONSTRATES THAT THE REQUIREMENTS OF SECTION 6 ALSO HAVE BEEN MET.
- (D) ALL PET SCANNERS TO BE ACQUIRED ARE LISTED ON THE DEPARTMENT INVENTORY OF PET SCANNERS ON THE DATE THE APPLICATION IS SUBMITTED TO THE DEPARTMENT.
- (E) THE APPLICANT AGREES TO OPERATE THE PET SCANNER SERVICE IN ACCORDANCE WITH ALL APPLICABLE PROJECT DELIVERY REQUIREMENTS SET FORTH IN SECTION 14.

#### SECTION 9. REQUIREMENTS FOR APPROVAL FOR APPLICANTS PROPOSING TO RELOCATE

196	AN EXISTING PET SCANNER SERVICE OR ITS UNIT(S)
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198	SEC. 9. (1) AN APPLICANT PROPOSING TO RELOCATE AN EXISTING FIXED PET SERVICE
199	AND ALL ITS EXISTING UNIT(S) SHALL DEMONSTRATE THAT IT MEETS ALL OF THE FOLLOWING:
00	(A) THE SERVICE AND ALL ITS EXISTING UNITS TO BE RELOCATED ARE FIXED PET
01	SCANNERS.
02	(B) THE EXISTING FIXED PET SERVICE TO BE RELOCATED HAS BEEN IN OPERATION FOR
503	AT LEAST 36 MONTHS AS OF THE DATE OF THE APPLICATION SUBMITTED TO THE
04	DEPARTMENT.
05	(C) THE PROPOSED NEW SITE OF THE EXISTING PET SERVICE TO BE RELOCATED IS IN
06	THE RELOCATION ZONE.
07	(D) THE PROPOSED PROJECT WILL NOT RESULT IN AN INCREASE IN THE NUMBER OF
808	PET SCANNER(S) OPERATED BY THE APPLICANT AT THE PROPOSED SITE UNLESS THE
09	APPLICANT DEMONSTRATES THAT THE REQUIREMENTS OF SECTION 5, AS APPLICABLE, HAVE
10	ALSO BEEN MET.
511	(E) THE PROPOSED PROJECT WILL NOT RESULT IN THE REPLACEMENT OF THE PET
12	SCANNER(S) OF THE SERVICE TO BE RELOCATED UNLESS THE APPLICANT DEMONSTRATES
13	THAT THE REQUIREMENTS OF SECTION 6, AS APPLICABLE, HAVE ALSO BEEN MET.
14	(F)THE APPLICANT AGREES TO OPERATE THE PET SERVICE AND ALL ITS UNITS IN
15	ACCORDANCE WITH ALL APPLICABLE PROJECT DELIVERY REQUIREMENTS SET FORTH IN
16	SECTION 15 OF THESE STANDARDS.
17	
18	(2) AN APPLICANT PROPOSING TO RELOCATE A PET SCANNER OF AN EXISTING PET
19	SERVICE SHALL DEMONSTRATE THAT IT MEETS ALL OF THE FOLLOWING:
20	(A) THE PET SCANNER TO BE RELOCATED IS A FIXED PET SCANNER.
21	(B) THE EXISTING FIXED PET SERVICE FROM WHICH THE PET SCANNER IS TO BE
22	RELOCATED HAS BEEN IN OPERATION FOR AT LEAST 36 MONTHS AS OF THE DATE OF THE
23	APPLICATION SUBMITTED TO THE DEPARTMENT.
24	(C) THE PROPOSED NEW SITE FOR THE PET SCANNER TO BE RELOCATED IS IN THE
25	RELOCATION ZONE.
26	(D) THE PROPOSED PROJECT WILL NOT RESULT IN THE REPLACEMENT OF THE PET
27	SCANNER(S) TO BE RELOCATED UNLESS THE APPLICANT DEMONSTRATES THAT THE
28	REQUIREMENTS OF SECTION 6, AS APPLICABLE, HAVE ALSO BEEN MET.
29	(E) THE APPLICANT AGREES TO OPERATE THE PET SCANNER AT THE PROPOSED SITE IN
30	ACCORDANCE WITH ALL APPLICABLE PROJECT DELIVERY REQUIREMENTS SET FORTH IN
31	SECTION 15.

# Section 810. Requirements for approval – FOR applicants proposing a dedicated research fixed PET scanner

Sec. <u>810</u>. (1) An applicant proposing to operate a fixed PET scanner (whether new or replacement) to be used exclusively for research shall demonstrate each of the following:

- (a) The PET scanner shall operate under a protocol approved by the applicant's Institutional Review Board.
- (b) The applicant agrees to operate the PET scanner in accordance with the terms of approval in Section  $\frac{1114}{4}(1)(a)$ , (b), (c)(vi), (d)(iii), (iv) and (v);  $\frac{1114}{4}(2)$ ;  $\frac{114}{4}(3)$ ; and  $\frac{1114}{4}(4)$ .
  - (c) The applicant has ACCESS TO an on-site cyclotron.
- (2) An applicant meeting the requirements of subsection (1) shall be exempt from meeting the requirements and terms of sections 3, 4, 5, 6, 7, 8, 9 and 1114(1)(c)(i), (ii), (iii), (iv), (v), (d)(i), and (d)(ii) of these standards.

SECTION 11. REQUIREMENTS FOR APPROVAL FOR APPLICANTS PROPOSING TO ESTABLISH A DEDICATED PEDIATRIC PET SCANNER

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(6) THE DEDICATED PEDIATRIC PET SCANNER SHALL BE EXCLUDED FROM THE ADULT **COUNT FOR THE FACILITY.** 

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#### Section 912. Additional requirements —for mobile PET service(s)/scanner(s)

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- Sec. 912. (1) An applicant proposing to begin operation of a mobile PET service/scanner shall demonstrate all of the following:
- (a) A separate CON application has been submitted by the central service coordinator and each proposed host site.
- (b) A proposed regular route schedule, the procedures for handling emergency situations, and copies of all proposed contracts related to the mobile PET service/scanner have been included in the CON application at the time it was submitted to the Department. If the required documentation for this subsection is not submitted with the application on the designated application date, the application will be deemed filed on the first applicable designated application date after all required documentation is received by the Department.
  - (c) The requirements of sections 3, 4, 5, and 6, as applicable, have been met.

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(2) An applicant proposing to become a host site on an existing mobile PET scanner network SERVICE shall demonstrate that it meets all of the following:

(a) Approval of the application will not result in an increase in the number of mobile PET scanners

listed on the "Department Inventory of PET Scanners" unless the requirements of Section 5 have been met.

(b) A proposed regular route schedule, the procedures for handling emergency situations, and copies of all proposed contracts related to the mobile PET scanner have been included in the CON application. at the time it was submitted to the Department. If the required documentation is not submitted with the application on the designated application date, the application will be deemed filed on the first applicable designated application date after all required documentation is received by the Department.

#### Section <u>4013</u>. Requirements for approval — <u>FOR</u> all applicants

Sec. <u>4013</u>. An applicant shall provide verification of Medicaid participation at the time the application is submitted to the Department. If the required documentation is not submitted with the application on the designated application date, the application will be deemed filed on the first applicable designated application date after all required documentation is received by the Department.

#### Section 4414. Project delivery requirements—AND terms of approval for all applicants

Sec. <u>4414</u>. (1) An applicant shall agree that, if approved, the services provided by the PET service shall be delivered in compliance with the following terms of CON approval:

(a) Compliance with these standards.

- (b) Compliance with applicable safety and operating standards.
- (c) Compliance with the following quality assurance standards:
- (i) The approved PET scanner shall be operating at the applicable required volumes specified in these standards. In meeting this requirement, an applicant shall <u>not</u> include any patient visits conducted by dedicated research PET scanners.
- (ii) An applicant shall establish and maintain (A) a standing medical staff and governing body (or its equivalent) requirement that provides for the medical and administrative control of the ordering and utilization of PET patient visits and (B) a formal program of utilization review and quality assurance. These responsibilities may be assigned to an existing body of the applicant, as appropriate.
- (iii) A PET service, whether fixed or mobile, shall be staffed so that screening of requests for PET procedures and/or interpretation of PET procedures will be carried out by a physician(s) with appropriate training and familiarity with the appropriate diagnostic use and interpretation of cross-sectional images of the anatomical region(s) to be examined. For purposes of evaluating this subsection, the Department shall consider it <a href="mailto:prima facie">prima facie</a> evidence as to the training of the physician(s) if the physician is board certified or board qualified in nuclear medicine or nuclear radiology. However, an applicant may submit, and the Department may accept, other evidence that the physician(s) is qualified to operate the PET service/scanner. The physician(s) must be on-site or available through telecommunication capabilities to participate in the screening of patients for PET procedures and to provide other consultation services.
- (iv) An applicant shall establish a PET service team. A PET service team shall be responsible for (A) developing criteria for procedure performance, (B) developing protocols for procedure performance, (C) developing a clinical data base for utilization review and quality assurance purposes, (D) transmitting requested data to the Department, (E) screening of patients to assure appropriate utilization of the PET scanner, (F) taking and interpreting scans, and (G) coordinating PET activity at a PET host site(s) for a mobile pet service(s)/scanner(s).
- (v) At a minimum, the PET service team shall include the following personnel, employed directly by the applicant or on a contractual basis: (A) a team leader, (B) technologists with training in PET scanning, (C) radiation safety personnel, and (D) a physicist(s). The physicist(s) must be board certified or eligible for certification by the American Board of Radiology or an equivalent organization. Other personnel that may be appropriate members of the PET service team, depending on the type of operation and PET procedures performed, include but are not limited to nurses, computer technicians, radio-chemists, radio-chemistry technicians, radio-pharmacists, and instrument maintenance technicians. If the team leader is not a physician, the PET service team also shall include a physician with appropriate training and familiarity with the appropriate diagnostic use and interpretation of cross-sectional images of the anatomical region(s) to be examined.

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- (vi) The applicant shall have, within the PET service, equipment and supplies to handle clinical emergencies that might occur within the PET service, with PET staff trained in CPR and other appropriate emergency interventions, and a physician on-site or immediately available to the PET service at all times when patients are undergoing PET procedures.
- (vii) An applicant shall participate in Medicaid at least 12 consecutive months within the first two years of operation and continue to participate annually thereafter.
- (VIII) FIXED AND MOBILE PET SCANNER UNITS SHALL BE OPERATING AT A MINIMUM AVERAGE ANNUAL LEVEL OF UTILIZATION DURING THE SECON TWELVE MONTHS OF OPERATION, AND ANNUALLY THEREAFTER, OF 1,500 PET EQUIVALENTS PER UNIT.
  - (d) Compliance with the following requirements:
- (i) The applicant shall accept referrals for PET scanner services from all appropriately licensed practitioners.
- (ii) The applicant, to assure that the PET scanner services will be utilized by all segments of the Michigan population, shall (A) not deny PET scanner services to any individual based on ability to pay or source of payment, (B) provide PET scanning services to any individual based on the clinical indications of need for the service, and (C) maintain information by payor and non-paying sources to indicate the volume of care from each source provided annually.

Compliance with selective contracting requirements shall not be construed as a violation of this term.

- (iii) The applicant shall participate in a data collection network established and administered by the Department or its designee. The data may include, but are not limited to annual budget and cost information, operating schedules, through-put schedules, demographic and diagnostic information, the volume of care provided to patients from all payor sources, and other data requested by the Department or its designee. The applicant shall provide the required data on a separate basis for each separate and distinct site, PET SCANNER, or PET service as required by the Department, in a format established by the Department, and in a mutually agreed upon media. The Department may elect to verify the data through on-site review of appropriate records. If the applicant intends to include research PET equivalents conducted by a PET scanner other than a dedicated research PET scanner in its utilization statistics, the applicant shall submit to the Department a copy of the research protocol with evidence of approval by the Institutional Review Board. The applicant shall submit this at the time the applicant intends to include research procedures in its utilization statistics. The applicant shall separately report to the Department any PET equivalents conducted by a dedicated research PET scanner.
- (iv) PET equipment to be replaced shall be removed from service on or before beginning operation of the replacement equipment, INCLUDING THE USE OF TEMPORARY SCANNERS AS PART OF THE REPLACEMENT PROJECT.
- (v) The applicant shall provide the Department with a notice stating the first date on which the PET service/scanner became operational, and such notice shall be submitted to the Department consistent with applicable statute and promulgated rules.
- (2) An applicant for a dedicated research PET scanner under Section 8-10 shall agree that the services provided by the PET scanner approved pursuant to Section 8-10 shall be delivered in compliance with the following terms of CON approval:
- (a) The capital and operating costs relating to the dedicated research PET scanner approved pursuant to Section 8 shall be charged only to a specific research account(s) and not to any patient or third-party payor.
- (b) The dedicated research PET scanner approved pursuant to Section 8-10 shall not be used for any purposes other than as approved by the Institutional Review Board unless the applicant has obtained CON approval for the PET scanner pursuant to Part 222 and these standards, other than Section 8 SECTION Y
- (3) The operation of and referral of patients to the PET service shall be in conformance with 1978 PA 368, Sec. 16221, as amended by 1986 PA 319; MCL 333.16221; MSA 14.15 (16221).
- (4) The agreements and assurances required by this section shall be in the form of a certification authorized by the governing body of the applicant or its authorized agent.

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### Section 4215. Project delivery requirements –AND additional terms of approval for applicants involving mobile PET service(s)/scanner(s)

- Sec. 4215. (1) In addition to the provisions of Section 4414, an applicant for a mobile PET service(s)/scanner(s) shall agree that the services provided by the mobile PET scanner(s) shall be delivered in compliance with the following terms of CON approval:
- (a) The central service coordinator for a mobile PET service, with an approved CON, shall notify the administrative unit of the Department of Community Health responsible for administering the CON program 30 days prior to dropping an existing host site.
- (b) Each host site must have at least one physician who is board certified or board eligible in nuclear medicine or nuclear radiology on its medical staff. The physician(s) shall be responsible for (i) establishing patient examination and infusion protocol and (ii) providing for the interpretation of scans performed by the mobile PET service/scanner.
- (c) Each mobile PET scanner service shall have an operations committee with members representing each host site, the central service coordinator, and the medical director. This committee shall oversee the effective and efficient use of the PET scanner, establish the regular route schedule, identify the process by which changes are to be made to the schedule, develop procedures for handling emergency situations, and review the ongoing operations of the mobile PET scanner service on at least a quarterly basis.
- (d) The central service coordinator shall arrange for emergency repair services to be available 24 hours each day for the mobile PET scanner equipment as well as the vehicle transporting the equipment. In addition, to preserve image quality and minimize PET scanner downtime, calibration checks shall be performed on the PET scanner unit at least once each work day or in accordance with the manufacturer's requirements. Routine maintenance services shall be provided on a regularly scheduled basis, at least once a week or in accordance with the manufacturer's requirements, during hours not normally used for patient procedures.
- (e) Each host site shall provide a properly prepared parking pad, for the mobile PET scanner unit, of sufficient load-bearing capacity to support the vehicle, a waiting area for patients, and a means for patients to enter the vehicle without going outside (such as an enclosed canopy or an enclosed corridor). Each host site also must provide the capability for processing the film and maintaining the confidentiality of patient records. A communication system must be provided between the mobile vehicle and each host site to provide for immediate notification of emergency medical situations.
- (f) A mobile PET scanner service shall operate under a contractual agreement that includes the provision of PET services at each host site on a regularly scheduled basis.
- (g) The volume of utilization at each host site shall be reported to the Department by the central service coordinator under the terms of Section 4414(1)(d)(iii).
- (h) At least 85 percent of the PET scans provided by the mobile PET scanner/service, annually, must be provided within the single planning area from which 85 percent of the diagnosis specific new cancer case, diagnostic cardiac catheterization, and/or intractable epilepsy data, as referenced in sections 15, 17, and 18, as applicable, was obtained for approval of the mobile PET scanner network.
- (2) The agreements and assurances required by this section shall be in the form of a certification authorized by the owner or the governing body of the applicant or its authorized agent.

#### Section 4316. Determination of PET equivalents

- Sec. 4316. For purposes of these standards, PET equivalents shall be calculated as follows:
- (a) Each actual patient visit performed during the time period specified in the applicable section(s) of these standards shall be assigned a number of PET equivalents based on the sum of the applicable values set forth in subsections (i) through (vii).
  - (i) A single patient visit

1.0

(ii) Number of chemically different tracers used during a single patient visit.

1 tracers = 0

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                  >2 tracers = 0.8
             (iii) Number of tracer injections performed
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                  during a single patient visit.
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                   1 \text{ tracer injection} = 0
                   2 \text{ tracer injections} = 0.3
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                  >3 tracer injections = 0.6
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             (iv) Dynamic scan(s) performed during a single
                                                                         0.5
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                  patient visit.
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             (v) Number of bed positions used during a single
                  patient visit.
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                   1 \text{ bed position} = 0
                  >2 bed positions = 0.2 for each additional position
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             (vi) Arterial sampling performed during a single
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                                                                         0.5
                  patient visit.
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            (vii) Transmission scan
                                                                         .1 per bed position
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                  Total PET Equivalents for a Single Patient Visit
             (b) For each pediatric patient visit, the PET equivalent(s) determined pursuant to subdivision (a)
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        shall be multiplied as follows:
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                  patient < 5 years of age multiply by 2.04.0
                  patient >5<10 years of age multiply by 1.753.0
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                  patient >10<<del>15</del>-17 years of age multiply by <del>1.5</del>2.0
             (c) FOR EACH RADIATION THERAPY PATIENT VISIT, THE PET EQUIVALENT(S)
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        DETERMINED PURSUANT TO SUBDIVISION (A) SHALL BE MULTIPLIED BY 1.5.
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             (D) The PET equivalents for each patient visit determined pursuant to subdivisions (a) and (b) shall
        be summed to determine the total PET equivalents for the time period specified in the applicable
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        section(s) of these standards.
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#### Section 4417. Methodology for computing the projected number of PET data units

Sec. <u>1417</u>. The applicant being reviewed under Section 4 shall apply the methodology set forth in this section in computing the projected number of PET data units.

- (1)(a) Identify the number of diagnosis specific new cancer cases documented in accord with the requirements of Section 4518.
- (b) Combine the number of cancer cases for lung (site codes C340-C349), esophagus (site codes C150-C159), colorectal (site codes C180-C209), lymphoma (morphology codes 9590-9729), melanoma (morphology codes 8720-8790), and head & neck [site codes C000-C148, C300-C329, C410, C411, C470 OR C490 excluding C440-C444 (skin of head and neck), AND ADDITIONAL CODES APPROVED BY NATIONAL COVERAGE DETERMINATION]. Use the name "combined" for this grouping.
- (c) Multiply the number resulting from the calculation in "combined" cancer cases identified in subsection (1)(b) by 0.8, which is the estimated probability that a "combined" cancer case will require a PET scan.
- (d) Multiply the number resulting from the calculation in subsection (1)(c) by 2.5, which is the estimated number of PET scans needed for each patient requiring a PET scan.
- (2)(a) Identify the number of diagnosis specific new cancer cases documented in accord with the requirements of Section  $\frac{4518}{1}$ .
- (b) Multiply the number of breast cancer cases (site codes C500-C509) by 0.25, which is the estimated probability that a breast cancer case will require a PET scan.
- (c) Multiply the number resulting from the calculation in subsection (2)(b) by 1.0, which is the estimated number of PET scans needed for each patient requiring a PET scan.
- (3)(a) Multiply the number of diagnostic cardiac catheterization cases identified in accord with the requirements of Section 47–20 by 0.1, which is the estimated probability that a patient having a diagnostic

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cardiac catheterization will require a PET scan.

(b) Multiply the number resulting from the calculation in subsection (3)(a) by 1.0, which is the estimated number of PET scans needed for each patient requiring a PET scan.

(4)(a) Multiply the number of intractable epilepsy cases (ICD-9-CM Codes 345.01, 345.11, 345.41, 345.51, 345.61, 345.71, 345.81, OR 345.91) identified in accord with the requirements of Section 48-21 by 1.0, which is the estimated probability that a patient having an intractable epilepsy procedure will require a PET scan.

(b) Multiply the number resulting from the calculation in subsection (4)(a) by 1.0, which is the estimated number of PET scans needed for each patient requiring a PET scan.

(5) Sum the numbers resulting from the calculations in subsections (1) through (4) to determine the total number of projected PET data units.

(6) Multiply the result calculated in subsection (5) above by a factor of 3.0 if the applicant is proposing to serve only Planning Area 6 to determine the total number of projected PET data units.

(7) Multiply the result calculated in subsection (5) above by a factor of 2.0 if the applicant is proposing to serve only Planning Area 5 to determine the total number of projected PET data units.

### Section 4518. Commitment of diagnosis specific new cancer cases

Sec. <u>4518</u>. (1) An applicant proposing to use diagnosis specific new cancer cases shall demonstrate all of the following:

(a) Only those cancer diagnoses identified in Section 1417(1) and 1417(2) shall be included.

(b) Each entity contributing diagnosis specific new cancer case data provides, as part of the application at the time it is submitted to the Department, a signed governing body resolution that identifies the number of diagnosis specific cancer cases being committed to the application and that states no current or future diagnosis specific new cancer case data will be used in support of any other application for a PET unit for A PERIOD OF THREE (3) YEARS FROM THE DATE OF START OF OPERATIONS OF THE APPROVED PET SERVICE for which data are being committed. If the required documentation for this subsection is not submitted with the application on the designated application date, the application will be deemed filed on the first applicable designated application date after all required documentation is received by the Department.

(c) For fixed PET scanner services, the geographic location of each entity contributing diagnosis specific new cancer case data is in the same planning area as the proposed PET unit/service.

(D) FOR MOBILE PET SCANNER SERVICES, THE GEOGRAPHIC LOCATION OF EACH ENTITY CONTRIBUTING DIAGNOSIS SPECIFIC NEW CANCER CASE DATA IS THE PLANNING AREA(S) FOR WHICH THE PROPOSED PET SERVICE CONTAINS A PROPOSED HOST SITE OR WITHIN A 75-MILE RADIUS OF THE PROPOSED HOST SITE FOR RURAL AND MICROPOLITAN STATISTICAL AREA COUNTIES OR 25-MILE RADIUS FOR METROPOLITAN STATISTICAL AREA COUNTIES.

(d) For mobile PET scanner services, at least 85 percent of the diagnosis specific new cancer case

data is from a single planning area in which 85 percent of the proposed mobile PET service (patient visits) will be provided.

(e) No entity contributing diagnosis specific new cancer case data HAS PREVIOUSLY

COMMITTED OR IS COMMITTING DATA TO ANOTHER SERVICE THAT IS LESS THAN THREE

(2) No entity currently operating or approved to operate a <u>unitSCANNER, WHETHER FIXED OR MOBILE,</u> listed on the "Department Inventory of PET Scanners" shall contribute diagnosis specific new cancer cases to support any PET service/scanner.

YEARS FROM THE START OF OPERATIONS OF THAT SERVICE AND is listed on the "Department Inventory of Pet Scanners,". nor does it have a pending application to initiate PET scanning service.

(3) No entity that has contributed any diagnosis specific cancer case data to another PET

- (43)(a) The Department may not consider a withdrawal of diagnosis specific new cancer case data during the 120-day application review cycle following the date on which the Department review of the application commences or after a proposed decision to approve the application has been issued UNLESS THE APPLICATION IS DENIED, WITHDRAWN, OR EXPIRED.
- (b) The withdrawal must be submitted to the Department in the form of a governing body resolution that contains the specific CON application number to which the data were originally committed, the legal applicant entity, the committing entity, the type of data, the date of the meeting in which the governing body authorized the withdrawal of the data, the governing body president's signature, and the date of the signature.

### Section 1619. Documentation of diagnosis specific new cancer case data

Sec. <u>4619</u>. (1) An applicant required to document volumes of diagnosis specific new cancer cases shall submit, as part of its application at the time it is submitted to the Department, documentation from the Division for Vital Records and Health Statistics verifying the number of diagnosis specific new cancer cases provided in support of the application for the most recent calendar year for which verifiable data are available from the State Registrar. If the required documentation for this subsection is not submitted with the application on the designated application date, the application will be deemed filed on the first applicable designated application date after all required documentation is received by the Department.

(2) Diagnosis specific new cancer case data supporting an application under these standards shall be submitted to the Division for Vital Records and Health Statistics using a format and media specified in instructions from the Department of Community Health.

#### Section 1720. Commitment and documentation of diagnostic cardiac catheterization data

Sec. <u>4720</u>. (1) An applicant proposing to use diagnostic cardiac catheterization data shall demonstrate all of the following:

 (a) Each entity contributing diagnostic cardiac catheterization data [pursuant to Section 4417(3)(a)] provides, as part of the application at the time it is submitted to the Department, a signed governing body resolution that identifies the number of diagnostic cardiac catheterization cases (sessions) committed to the application and that states no current or future diagnostic cardiac catheterization data will be used in support of any other application for a PET unit for the duration of the PET service for which data are being committed FOR A PERIOD OF THREE (3) YEARS FROM THE DATE OF START OF OPERATIONS OF THE APPROVED PET SERVICE FOR WHICH DATA ARE BEING COMMITTED. If the required documentation for this subsection is not submitted with the application on the designated application date, the application will be deemed filed on the first applicable designated application date after all required documentation is received by the Department.

- (b) For fixed PET scanner services, the geographic location of each entity contributing diagnostic cardiac catheterization data is in the same planning area as the proposed PET unit/service.
- (c) For mobile PET scanner services, at least 85 percent of the diagnostic cardiac catheterization data is from a single planning area in which 85 percent of the proposed mobile PET service (patient visits) will be provided.
- (C) FOR MOBILE PET SCANNER SERVICES, THE GEOGRAPHIC LOCATION OF EACH ENTITY CONTRIBUTING DIAGNOSIS SPECIFIC NEW CANCER CASE DATA IS THE PLANNING AREA(S) FOR WHICH THE PROPOSED PET SERVICE CONTAINS A PROPOSED HOST SITE OR WITHIN A 75-MILE RADIUS OF THE PROPOSED HOST SITE FOR RURAL AND MICROPOLITAN STATISTICAL AREA COUNTIES OR 25-MILE RADIUS FOR METROPOLITAN STATISTICAL AREA COUNTIES.
- (d) No entity contributing diagnostic cardiac catheterization data <a href="HAS PREVIOUSLY COMMITTED">HAS PREVIOUSLY COMMITTED</a>
  OR IS COMMITTING DATA TO ANOTHER SERVICE THAT IS LESS THAN THREE YEARS FROM THE
  START OF OPERATIONS OF THAT SERVICE AND is listed on the "Department Inventory of Pet

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- (e) The diagnostic cardiac catheterization case data is from the most recently completed report(s) of the "Annual Hospital Statistical Questionnaire" produced by the Department, and the contributing entity has CON Approval to provide diagnostic cardiac catheterization services.
- (2) No entity currently operating or approved to operate a PET scanner, <u>WHETHER FIXED OR MOBILE</u>, listed on the "Department Inventory of PET Scanners" shall contribute diagnostic cardiac catheterization case data\_to support any PET service/scanner.
- (3) No entity that has contributed any diagnostic cardiac catheterization case data to another PET application for which the approved PET scanner service still is operational shall commit diagnostic cardiac catheterization case data to any other application.
- (43)(a) The Department may not consider a withdrawal of diagnostic cardiac catheterization case data during the 120-day application review cycle following the date on which the Department review of the application commences or after a proposed decision to approve the application has been denied UNLESS THE APPLICATION IS DENIED, WITHDRAWN, OR EXPIRED.
- (b) The withdrawal must be submitted to the Department in the form of a governing body resolution that contains the specific CON application number to which the data were originally committed, the legal applicant entity, the committing entity, the type of data, the date of the meeting in which the governing body authorized the withdrawal of the data, the governing body president's signature, and the date of the signature.

#### Section <u>1821</u>. Commitment and documentation of intractable epilepsy data

- Sec. <u>1821</u>. (1) An applicant proposing to use intractable epilepsy cases shall demonstrate all of the following:
- (a) Each entity contributing intractable epilepsy data [pursuant to Section 4417(4)(a)] provides, as part of the application at the time it is submitted to the Department, a signed governing body resolution that identifies the number of intractable epilepsy cases committed to the application and that states no current or future intractable epilepsy case data will be used in support of any other application for a PET unit for the duration of the PET service for which the data are being committed FOR A PERIOD OF THREE (3) YEARS FROM THE DATE OF START OF OPERATIONS OF THE APPROVED PET SERVICE FOR WHICH DATA ARE BEING COMMITTED. If the required documentation for this subsection is not submitted with the application on the designated application date, the application will be deemed filed on the first applicable designated application date after all required documentation is received by the Department.
- (b) For fixed PET scanner services, the geographic location of each entity contributing intractable epilepsy case data is in the same planning area as the proposed PET unit/service.
- (c) For mobile PET scanner services, at least 85 percent of the intractable epilepsy data is from a single planning area in which 85 percent of the proposed mobile PET service (patient visits) will be provided.
- (C) FOR MOBILE PET SCANNER SERVICES, THE GEOGRAPHIC LOCATION OF EACH ENTITY CONTRIBUTING DIAGNOSIS SPECIFIC NEW CANCER CASE DATA IS THE PLANNING AREA(S) FOR WHICH THE PROPOSED PET SERVICE CONTAINS A PROPOSED HOST SITE OR WITHIN A 75-MILE RADIUS OF THE PROPOSED HOST SITE FOR RURAL AND MICROPOLITAN STATISTICAL AREA COUNTIES OR 25-MILE RADIUS FOR METROPOLITAN STATISTICAL AREA COUNTIES.
- (d) No entity contributing intractable epilepsy case data <u>HAS PREVIOUSLY COMMITTED OR IS</u> <u>COMMITTING DATA TO ANOTHER SERVICE THAT IS LESS THAN THREE YEARS FROM THE</u> <u>START OF OPERATIONS OF THAT SERVICE AND</u> is listed on the "Department Inventory of Pet Scanners," <u>nor does it have a pending application to initiate PET scanning service.</u>
- (e) The intractable epilepsy case data is from the most recent Michigan Inpatient Data Base (MIDB) available to the Department.

- (2) No entity currently operating or approved to operate a <u>SCANNERunit, WHETHER FIXED OR MOBILE</u>, listed on the "Department Inventory of Pet Scanners" shall contribute intractable epilepsy case data-to-support any PET service/scanner.
- (3) No entity that has contributed any intractable epilepsy case data to another PET application for which the approved PET scanner service still is operational shall commit intractable epilepsy case data to any other application.
- (43)(a) The Department may not consider a withdrawal of intractable epilepsy case data during the 120-day application review cycle following the date on which the Department review of the application commences or after a proposed decision to approve the application UNLESS THE APPLICATION IS DENIED, WITHDRAWN, OR EXPIRED.
- (b) The withdrawal must be submitted to the Department in the form of a governing body resolution that contains the specific CON application number to which the data were originally committed, the legal applicant entity, the committing entity, the type of data, the date of the meeting in which the governing body authorized the withdrawal of the data, the governing body president's signature, and the date of the signature.

#### Section <u>1922</u>. Health Service Areas

Sec. <u>4922</u>. Counties assigned to each health service area are as follows:

1013	HEALTH SERVICE AREA	COUNTIES		
1014				
1015	1	Livingston	Monroe	St. Clair
1016		Macomb	Oakland	Washtenaw
1017		Wayne		
1018				
1019	2	Clinton	Hillsdale	Jackson
1020		Eaton	Ingham	Lenawee
1021				
1022	3	Barry	Calhoun	St. Joseph
1023		Berrien	Cass	Van Buren
1024		Branch	Kalamazoo	
1025				
1026	4	Allegan	Mason	Newaygo
1027		Ionia	Mecosta	Oceana
1028		Kent	Montcalm	Osceola
1029		Lake	Muskegon	Ottawa
1030				
1031	5	Genesee	Lapeer	Shiawassee
1032				
1033	6	Arenac	Huron	Roscommon
1034		Bay	losco	Saginaw
1035		Clare	Isabella	Sanilac
1036		Gladwin	Midland	Tuscola
1037		Gratiot	Ogemaw	
1038				
1039	7	Alcona	Crawford	Missaukee
1040		Alpena	Emmet	Montmorency
1041		Antrim	Gd Traverse	Oscoda
1042		Benzie	Kalkaska	Otsego
1043		Charlevoix	Leelanau	Presque Isle
1044		Cheboygan	Manistee	Wexford
1045				

1046	8	Alger	Gogebic	Mackinac
1047		Baraga	Houghton	Marquette
1048		Chippewa	Iron	Menominee
1049		Delta	Keweenaw	Ontonagon
1050		Dickinson	Luce	Schoolcraft
		DICKINSON	Luce	Schoolcraft
1051				
1052	Section <del>20</del> 23. Planning Areas			
1053				
1054	Sec. 2023. Health service areas assigned to each planning area are as follows:			
1055	·			
1056	PLANNING AREA 1	COUNTIES		
1057				
1058	HSA 1	Livingston	Monroe	St. Clair
	HOAT	Macomb	Oakland	Washtenaw
1059			Oakianu	wasiilenaw
1060		Wayne		
1061				
1062	PLANNING AREA 2			
1063				
1064	HSA 2	Clinton	Hillsdale	Jackson
1065		Eaton	Ingham	Lenawee
1066	HSA 3	Barry	Calhoun	St. Joseph
1067		Berrien	Cass	Van Buren
1068		Branch	Kalamazoo	van Balen
		Dianti	Naiailiazuu	
1069	DI ANNUNG AREA O			
1070	PLANNING AREA 3			
1071				
1072	HSA 4	Allegan	Mason	Newaygo
1073		Ionia	Mecosta	Oceana
1074		Kent	Montcalm	Osceola
1075		Lake	Muskegon	Ottawa
1076				
1077	PLANNING AREA 4			
1077	I LAMMINO ANEA 4			
	1104 5	0	1	Chiamana
1079	HSA 5	Genesee	Lapeer	Shiawassee
1080	HSA 6	Arenac	Huron	Roscommon
1081		Bay	losco	Saginaw
1082		Clare	Isabella	Sanilac
1083		Gladwin	Midland	Tuscola
1084		Gratiot	Ogemaw	
1085			· ·	
1086	PLANNING AREA 5			
1087	7. 27.11.11.10			
1088	HSA 7	Alcona	Crawford	Missaukee
	поа /			
1089		Alpena	Emmet	Montmorency
1090		Antrim	Gd Traverse	Oscoda
1091		Benzie	Kalkaska	Otsego
1092		Charlevoix	Leelanau	Presque Isle
1093		Cheboygan	Manistee	Wexford
1094				
1095	PLANNING AREA 6			
1096				
1090	HSA 8	Alger	Gogebic	Mackinac
	HOA 0	•	_	
1098		Baraga	Houghton	Marquette
1099		Chippewa	Iron	Menominee
1100		Delta	Keweenaw	Ontonagon
				CON-227
	Proposed Language for			

Schoolcraft 1101 Dickinson Luce 1102 1103 | Section 2124. Department Inventory of PET Scanners 1104 Sec. 2424. THE DEPARTMENT SHALL MAINTAIN AND PROVIDE UPON REQUEST A LISTING 1105 OF THE DEPARTMENT INVENTORY OF PET SCANNERS AS OF THE EFFECTIVE DATE OF THESE 1106 STANDARDS. Appendix A sets forth the PET scanners listed on the "Department Inventory of PET 1107 Scanners" as of the effective date of these standards. Modification to Appendix A shall be made by the 1108 Department pursuant to decisions on CON applications and Certificates of Need. 1109 1110 1111 Section 2225. Comparative reviews; effect on prior planning policies 1112 Sec. 2225. (1) Proposed projects reviewed under these standards shall not be subject to 1113 1114 comparative review except for applicants under Section 4(4) that may be subject to comparative review. 1115 1116 (2)(a) These CON review standards supersede and replace the CON Standards for Positron 1117 Emission Tomography approved by the CON Commission on December 11, 2001MARCH 9, 2004 and effective February 25, 2002 JUNE 4, 2004. 1118 1119 1120 Section 23. Public Hearing for future revisions to standards 1121

Sec. 23. The CON Commission shall hold a public hearing to consider the formation of an ad hoc advisory committee, on or before March 31, 2004, to review and recommend, at a minimum, changes to Section 4 (initiation) of these standards.

1122

1123

DEPARTMENT INVENTO	RY OF PET SCANNERS
FIXED PET SCANNERS	
PET Facility	Number of
<u>Location</u>	PET Scanners
Children's Hospital of Michigan	<del>1</del>
Detroit (Wayne)	
Michigan State University	4
Michigan State University East Lansing (Ingham)	
East Lansing (ingham)	
Spectrum Health - St. Mary's	1
Grand Rapids (Kent)	<del>-</del>
Grand Haplas (Horry	
University of Michigan Hospitals	1
Ann Arbor (Washtenaw)	
,	
William Beaumont Hospital	<del>2</del>
Royal Oak (Oakland)	
MOBILE PET SCANNERS	
CENTRAL SERVICE COORDINATOR:	CENTRAL SERVICE COORDINATOR:
OMC Mobile Diagnostics (Network #118)	Alliance – HNI Leasing Co. (Network #122)
Detroit (Wayne)	<del>Portage (Kalamazoo)</del>
HOST SITES:	HOST SITES:
Harper University Hespital	West Michigan Cancer Center
Detroit (Wayne)	Kalamazoo (Kalamazoo)
Solicit (Wayno)	rtalamazoo (rtalamazoo)
Sinai-Grace Hospital	Lakeland Hospitals @ Niles & St. Joseph
Detroit (Wayne)	(St. Joseph (Berrien)
Huron Valley-Sinai Hospital	Mt. Clemens General Hospital
Commerce Township (Oakland)	Mt. Clemens (Macomb)
CENTRAL SERVICE COORDINATOR:	CENTRAL SERVICE COORDINATOR:
Great Lakes Mobile Pet (Network #125)	Michigan Mobile Pet (Network #126)
Traverse City (Grand Traverse)	Flint (Genesee)
LIGOT OITES	LIGOT OFFI
HOST SITES:	HOST SITES:
Northern Michigan Hospital Petoskey (Emmet)	Bay Regional Medical Center Bay City (Bay)
r <del>oluskoy (Eminici)</del>	<del></del>
Munson Community Health Center	McLaren Regional Medical Center
Traverse City (Grand Traverse)	Flint (Genesee)
Traverse only (Grand Traverse)	1 mit (30110300)
Alpena General Hospital	Ingham Regional Medical
Center	
Alpena (Alpena)	Lansing (Ingham)

1179 1180 APPENDIX A continued 1181 1182 **MOBILE PET SCANNERS CONTINUED** 1183 **CENTRAL SERVICE COORDINATOR:** CENTRAL SERVICE COORDINATOR: 1184 Shared Pet Imaging, LLC (Network #124) Henry Ford Medical Center - Fairlane (Network 1185 1186 <del>#127)</del> 1187 Canton, Ohio Dearborn (Wayne) 1188 **HOST SITES: HOST SITES:** 1189 1190 Battle Creek Health System Henry Ford Medical Center - Fairlane Battle Creek (Calhoun) 1191 Dearborn (Wayne) 1192 1193 St. Joseph Mercy Hospital - Ann Arbor Henry Ford Hospital Ann Arbor (Washtenaw) Detroit (Wayne) 1194 1195 St. Joseph Mercy Oakland Henry Ford Medical Ctr - Sterling Heights 1196 Pontiac (Oakland) 1197 Sterling Heights (Macomb) 1198 Henry Ford Medical Center - West Bloomfield 1199 Mercy Health Center - Fort Gratiot 1200 Gratiot (St. Clair) West Bloomfield (Oakland) 1201 Henry Ford Wyandotte Hospital 1202 St. Mary Mercy Hospital Livonia (Wayne) 1203 Wyandotte (Wayne) 1204 1205 Edward W. Sparrow Hospital Bi-County Community Hospital Lansing (Ingham) Warren (Macomb) 1206 1207 CENTRAL SERVICE COORDINATOR: 1208 DMS Imaging, Inc. (Network #132) 1209 1210 Osseo, Minnesota 1211 **HOST SITES:** 1212 1213 Marquette General Hospital, Inc. Marquette (Marquette) 1214

1216	i	APPENDIX B
1217		
1218	DEDICATED RESEARCH PET SCANNERS	
1219		
1220	Numb	<del>oer of</del>
1221	PET Facility Dedic	ated Research
1222	Location PET S	<u>Scanners</u>
1223		
1224	University of Michigan Hospitals 1	
1225		
1226		
1227	Mid-Michigan MRI 1	
1228		
1229		
1230	Children's Hospital Of Michigan 1	
1231		

1232				APPENDIX CA
1233				
1234		CON REVIEW STAN		
1235	FOR PET SCANNER SERVICES			
1236	D. and M. alling a control of the control	- C. II.		
1237	Rural Michigan counties are as	S TOIIOWS:		
1238	Aleene		0	
1239	Alcona	Hillsdale	Ogemaw	
1240	Alger	Huron	Ontonagon	
1241	Antrim	losco	Osceola	
1242	Arenac	Iron	Oscoda	
1243	Baraga	Lake	Otsego	
1244	Charlevoix	Luce	Presque Isle	
1245	Cheboygan	Mackinac	Roscommon	
1246	Clare	Manistee	Sanilac	
1247	Crawford	Mason	Schoolcraft	
1248	Emmet	Montcalm	Tuscola	
1249	Gladwin	Montmorency		
1250	Gogebic	Oceana		
1251	NA:	alainen aavustiaa asa aa fallavu		
1252	Micropolitan statistical area Mi	chigan counties are as follows	5:	
1253	Alleren	Overtical.	NA t -	
1254	Allegan	Gratiot	Mecosta	
1255	Alpena	Houghton	Menominee	
1256	Benzie	Isabella	Midland	
1257	Branch	Kalkaska	Missaukee	
1258	Chippewa	Keweenaw	St. Joseph	
1259	Delta	Leelanau	Shiawassee	
1260	Dickinson	Lenawee	Wexford	
1261	Grand Traverse	Marquette		
1262	NASAN SERVICE SERVICES AND SERV	California de la Caraciana de Ma	_	
1263	Metropolitan statistical area M	icnigan counties are as follows	S:	
1264	Dawn	laula	Name	
1265	Barry	Ionia	Newaygo	
1266	Bay	Jackson	Oakland	
1267	Berrien	Kalamazoo	Ottawa	
1268	Calhoun	Kent	Saginaw	
1269	Cass	Lapeer	St. Clair	
1270	Clinton	Livingston	Van Buren	
1271	Eaton	Macomb	Washtenaw	
1272	Genesee	Monroe	Wayne	
1273	Ingham	Muskegon		
1274	0			
1275	Source:			
1276	05 5 D = 00000 (D = = = 1	27 0000)		
1277	65 F.R., p. 82238 (December 27, 2000)			
1278	Statistical Policy Office			
1279	Office of Information and Regulatory Affairs			
1280	United States Office of Manag	ement and Budget		
1281				